March 23, 2017

1967 1 MB 0.423 ***MIXED AADC 720 R:1967 T:8 P:10 PC:4 F:714601 CRANDALL & KATT 366 ELM AVE SW ROANOKE, VA 24016-4028



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March 23, 2017

1967 1 MB 0.423 ***MIXED AADC 720 R:1967 T:8 P:10 PC:4 F:714601 ESTATE OF MIRIAM Y WARREN 1 CRAWFORD PKWY PORTSMOUTH, VA 23704-2609

RE: Beneficiary Name:

WARREN, MIRIAM Y

Medicare ID:

234264302A

Case Identification Number: 20162 08090 00621

Insurer Policy Number:

234264302

Date of Incident:

August 23, 2012

Demand Amount:

\$4,264.87

Dear Estate of MIRIAM Y WARREN:

If we know you have a representative for this matter, we are sending him/her a copy of this letter. If you have any questions regarding this letter and are represented by an attorney or other individual in this matter, you may wish to talk to your representative before contacting us.

We are writing to you because we learned you have received a settlement, judgment, award, or other payment related to your case for the Date of Incident listed above. We have determined